

HAWAII STATE ETHICS COMMISSION

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Web site: www.hawaii.gov/ethics

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LOBBYIST REGISTRATION FORM STATE OF HAWAII
(Type or Print Clearly)

PART I LOBBYIST		r Print Clearly)	
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PART II ORGANIZATION		
NAME OF ORGANIZATION YOU L	TELEPHONE	
Covanta Energy	862-345-5062 FAX EMAIL	
MAILING ADDRESS (Street)		
445 South Street		
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Morristown	NJ	07960
NAME OF PERSON RESPONSIBLE FO	TELEPHONE	
Paula Soos		862-345-5062
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PART III DESCRIPTIO	N OF SUBJECTS UPON WH	ICH YOU EXPECT TO LOBI	BY	
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	 Intergovernmental Relations, International Affairs 	☐ Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	✓ Labor & Employment	☐ Transportation	
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections		
PART IV CERTIFICATI	ON OF LOBBYIST			
I hereby certify that t	he informațion furnished abov	e is, to the best of my knowle	edge, correct and complete.	
_ Muilo	G. Velasce	03	03-26-13	
	(Signature of Lobbyist)			
PART V AUTHORIZAT	TION TO LOBBY		· · · · · · · · · · · · · · · · · · ·	
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED			
Paula Soos				
NAME OF ORGANIZATION (if applicable)			TELEPHONE	
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Morristown	NJ		07960	
I hereby authorize th	e above - named person to ei	ngage in lobbying activities or	n behalf of the undersigned.	
Parle So	יכיט		3/7/13	
(Signature of	Authorizing Officer or Person Repres	sented)	(Date)	